FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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								Wa	as	hin	gto	n,	D.	C.	2	05

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL					
OMB Number:	3235-0362					
Estimated average b	urden					
hours per response:	1.0					

Form 3 Holdings Reported.

X Form 4	4 Transactions	Reported.	File	d pursuant to S or Section 3								ı							
1. Name a	2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify										
(Last) P.O. BO	(Fii X 1387	est) (Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2022									belov			belo	ow)	,	
			46581-1387	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(31	•	Zip) • I - Non-Deriva	ative Secu	rities	s Acc	uire	d Dis	nosed	of o	r Bene	ficial	lly Own	ed					
1. Title of Security (Instr. 3) 2. Trans Date			2. Transaction	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)					5. Amou Securitie Benefici	Amount of ecurities eneficially wned at end of		Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership	
										(A) or (D)	Price	'rice		Issuer's Fiscal Year (Instr. 3 and 4)				(Instr. 4)	
Common Stock			06/17/2022			W		1:	150 A		\$(\$0		3,064		D			
Common Stock			12/31/2022			J4 ⁽¹⁾		22		A	\$75.	\$75.57		1,062		I		401(k) Plan	
		Та	ble II - Derivat (e.g., p	ive Securit uts, calls, v									/ Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) of Disp of (D	osed)) :r. 3, 4	Expi (Mor	te Exercisable and ration Date tht/Day/Year) The property of the first state of the firs		str.	. Price of Derivative Security Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact (Instr. 4)	rative rities of line		hip c E D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. Salary redirection and/or dividend reinvestment in 401(k) plan for 2022.

/s/ Becka J. Turnbow, 02/13/2023 Attorney-in-Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.